

Table of Contents

8.2	Screening for Potential Eligibility and Processing HIP Application Requests	8.2-1
8.2.1	Screening for Potential Eligibility	8.2-1
8.2.1.1	Overview	8.2-1
8.2.2	Processing a HIP Application Request	8.2-1
8.2.2.1	A Person Calls to Apply for HIP - Agrees to Screen for Potential Eligibility	8.2-1
8.2.2.2	Person Calls to Apply for HIP and Other Benefits – Agrees to Complete Screening	8.2-10
8.2.2.3	A Person Calls to Apply for HIP - Decides Not to Screen	8.2-16
8.2.2.4	A Person Calls to Apply for HIP and Other Programs - Decides Not to Screen	8.2-19

8.2 Screening for Potential Eligibility and Processing HIP Application Requests

8.2.1 Screening for Potential Eligibility

8.2.1.1 Overview

Screening for Potential Eligibility instructions describe how a HIP Tier 1 Intake Consultant handles a call from:

- A person (or someone calling on his/her behalf) who wants to determine potential eligibility for the HIP program and/or requests an application for HIP.
- A person (or someone calling on his/her behalf) who decides not to complete screening but requests an application for HIP.

8.2.2 Processing a HIP Application Request

8.2.2.1 A Person Calls to Apply for HIP - Agrees to Screen for Potential Eligibility

When a call comes into the Call Center and the caller selects “Healthy Indiana Plan” from the IVR Main Menu, the agent’s screen displays “Apply for HIP” as the reason for the call. If the caller has been authenticated (entered last four digits of SSN and either Case Number or date of birth, and these match an open or previously opened case), the screen displays details regarding the caller’s case. If the caller has not been found in the system as the case name or has not entered authenticating information, the reason for the call displays above a Person Search screen.


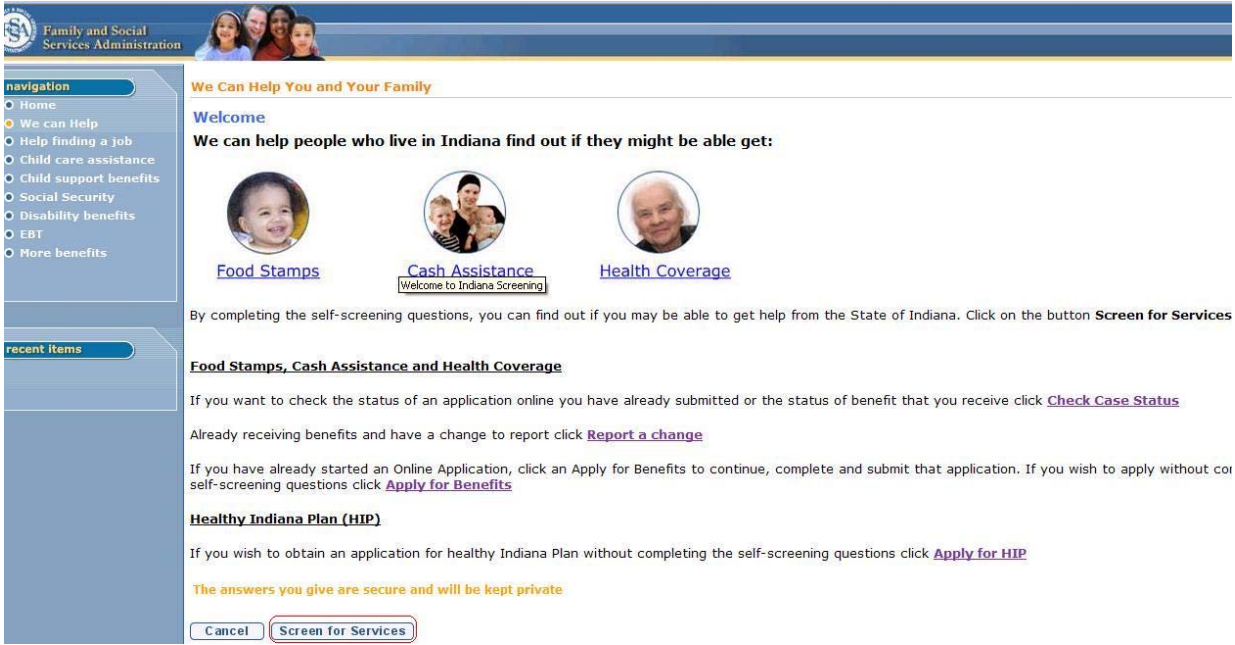
Whether the caller is known or unknown to the system or is calling for herself or someone else, the agent responds to the caller’s request to apply, performs screening, and provides application options.

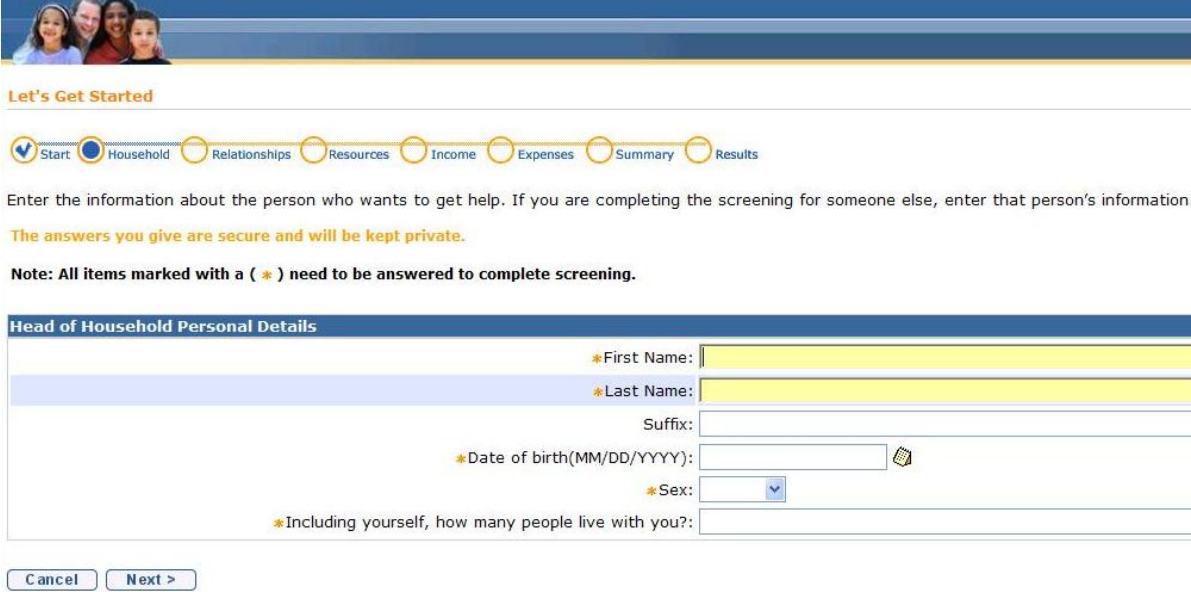
Although the screening process is optional, it provides valuable information on potential eligibility for services. A caller may decide to apply at any time without completing the screening process.

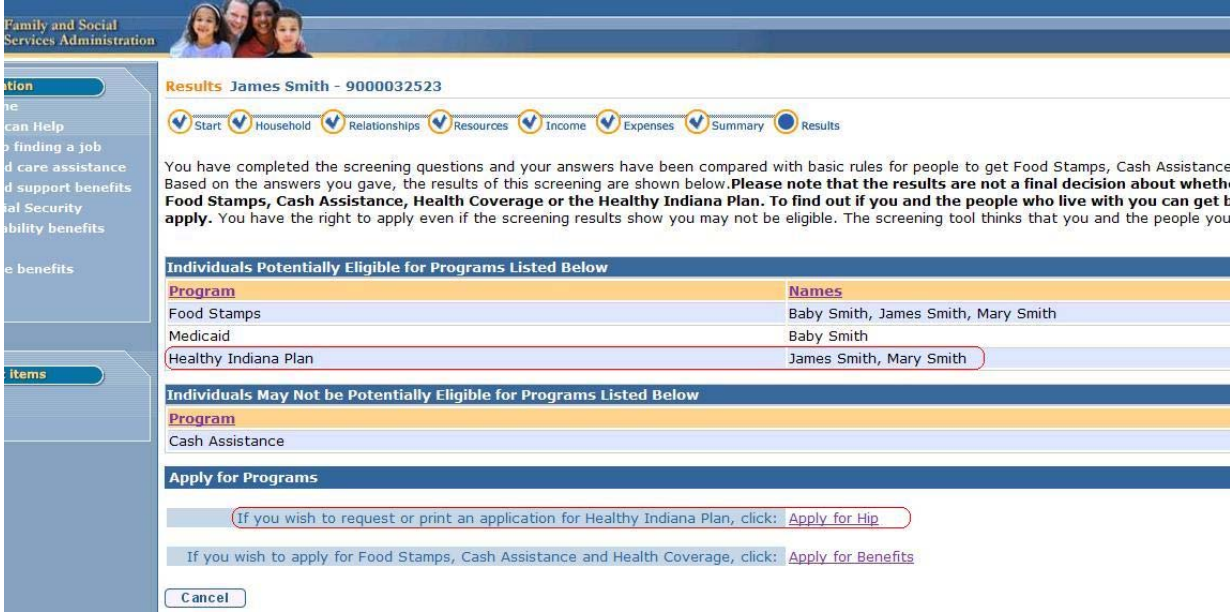

A Client can screen for HIP as well as other benefit programs during the screening process.


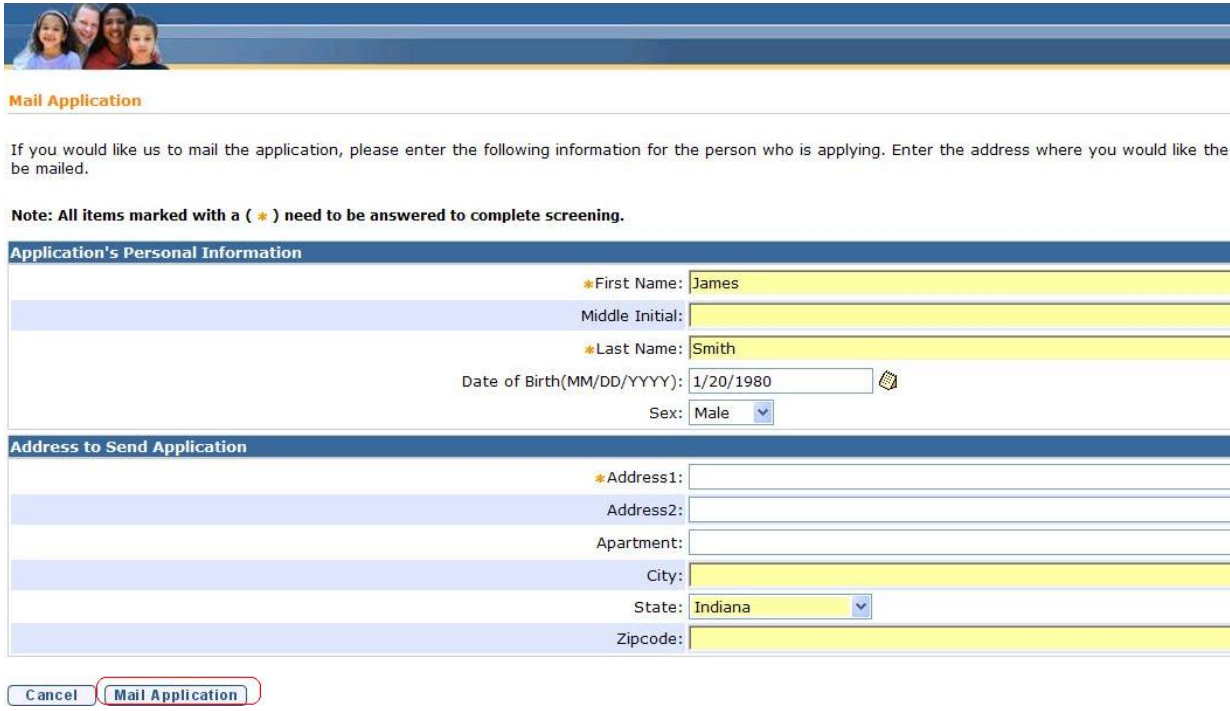
Step	Person Calls to Apply for HIP – Agrees to Complete Screening								
1.	<p>Review the reason for the call (which is displayed) and confirm the reason with the caller.</p> <p>Case Details for Call Center: SALLY JONES - 3000276521 Help</p> <table><tr><td><u>Reason For Call</u></td><td><u>Reason For Transfer</u></td><td><u>Caller Number</u></td><td><u>Caller Language</u></td></tr><tr><td>Apply for Assistance</td><td></td><td>765-668-5579</td><td>English</td></tr></table> <p>Note Text</p> <div></div> <p>Note History</p> <p>Save</p> <p>Options</p> <hr/> <p>Note: The Note Text box is displayed to enter notes on the call, but only when the caller is known to the system. If the caller is not known to the system, the Note Text box is not displayed.</p> <hr/> <ul style="list-style-type: none">✓ If the person is calling for a different or another reason, or for questions regarding a different program, complete the HIP request for assistance.✓ Refer to HIP Call Center scripts to respond to other questions.	<u>Reason For Call</u>	<u>Reason For Transfer</u>	<u>Caller Number</u>	<u>Caller Language</u>	Apply for Assistance		765-668-5579	English
<u>Reason For Call</u>	<u>Reason For Transfer</u>	<u>Caller Number</u>	<u>Caller Language</u>						
Apply for Assistance		765-668-5579	English						

Step	Person Calls to Apply for HIP – Agrees to Complete Screening
3.	<p>If the caller confirms the purpose of the call is to apply for HIP:</p> <ul style="list-style-type: none"> ✓ Inform the caller that by answering a few questions, the caller can learn of potential eligibility for HIP during the call. ✓ Explain that the questions focus on the people in the home, any income received from a job or other sources, and other information related to the person who is screened for potential eligibility and may be applying for HIP. ✓ Explain to the caller that the information provided is confidential and that regardless of the result of screening, the caller can continue with the process of requesting and submitting an application for HIP.
4.	<p>If the Client is already participating in the HIP program, advise the Client of her OPEN or COND status and advise her that she can continue the screening process without affecting her current benefits.</p> <ul style="list-style-type: none"> ✓ Ask her if she wants to continue the screening process. ✓ If she says yes, continue to the next step. ✓ If she says no, document in ICES case notes and go to step 16.
5.	<p>Inform the caller that the screening questions are also available on the internet, and ask if she has internet access.</p> <ul style="list-style-type: none"> ✓ If she has no internet access, or wants to continue the screening process, continue to Step 6. ✓ If she has internet access and prefers to complete the screening online, provide the website www.IN.gov/fssa/apply/ or at www.HIP.IN.gov. <p>Inform the caller of the following:</p> <ul style="list-style-type: none"> ✓ Explain that the caller may complete the screening questions at this site and then print the application to mail or fax to the FSSA Document Center for processing, or; ✓ Screening can be completed during the current call and an application mailed afterwards to the caller ✓ If the caller decides to access the screening tool on the internet: ✓ Repeat the web site address. ✓ Ask the caller if she has any additional questions, and respond to those questions before concluding the call. ✓ Inform the caller she can call back at 1-800-403-0864 between the hours of 7 am and 7 pm if she has additional questions. ✓ Go to Step 16. <hr/> <p>Note: <i>If the caller indicates there is a reason why she cannot mail or fax an application, provide the website www.in.gov/fssa/dfi to locate a Local Office or Help Center or go to the office locator in the OPS Tool to provide the address for the office in the caller's county.</i></p> <hr/> <ul style="list-style-type: none"> ✓ If the caller decides to continue with screening, continue to Step 6.

Step	Person Calls to Apply for HIP – Agrees to Complete Screening
6.	<p>Click <i>Home</i> in the upper right corner of the screen to navigate to the User Home page. ✓ Click <i>Process Request for Services</i> to navigate to the screening tool.</p> 
7.	<p>Click <i>Screen for Services</i>.</p> 

Step	Person Calls to Apply for HIP – Agrees to Complete Screening
8.	<p>Move forward to the Let's Get Started screen. Enter the caller's information and click <i>Next</i>.</p> 
9.	<p>Ask the questions presented on each screen, and enter the caller's response to each question. Accurate entry of information is critical. Questions requiring a response are displayed with an asterisk (*).</p> <ul style="list-style-type: none"> ✓ When you get to the Summary of Household, Resources, Income, and Expenses screen, review all information in each section with the caller and make any updates needed. ✓ Not all questions require a response, and if the caller prefers not to respond to a particular question, continue to the next screening question. ✓ Navigate through the screening to the Results screen.
10.	<p>Explain that the screening results are not a final eligibility decision, and inform the caller that eligibility can officially be determined only if an application is submitted.</p> <ul style="list-style-type: none"> ✓ Inform the caller that she may file an application for benefits regardless of the screening results.

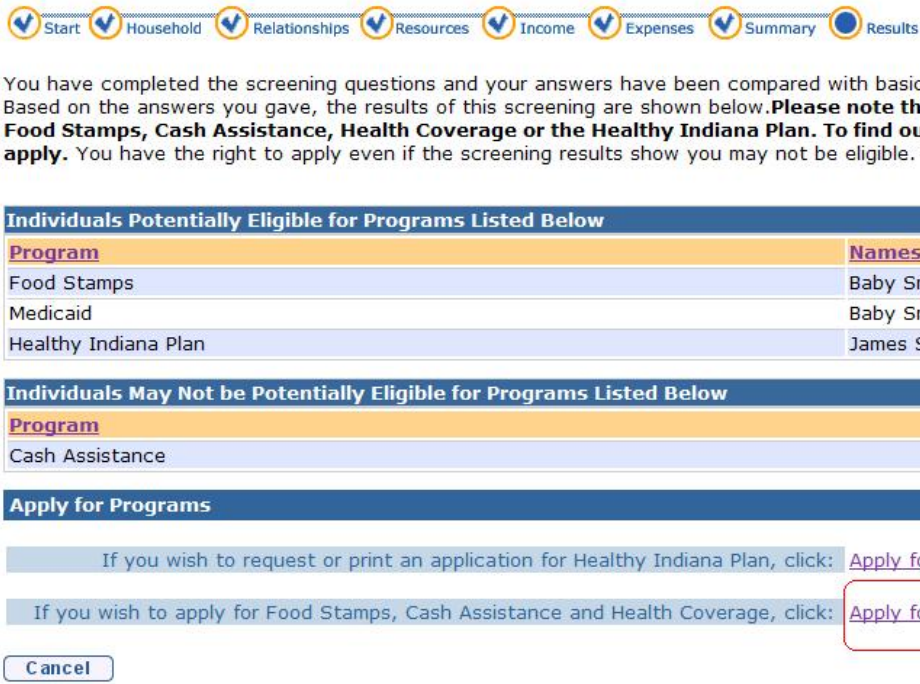
Step	Person Calls to Apply for HIP – Agrees to Complete Screening
11.	<p>Review the Results Screen with the caller.</p> <ul style="list-style-type: none"> ✓ Explain which household members are potentially eligible for the Healthy Indiana Plan. ✓ Explain which household members may not be eligible for the Healthy Indiana Plan. 
12.	<p>If the caller wishes to apply for HIP, click <i>Apply for HIP</i>.</p> 

Step	Person Calls to Apply for HIP – Agrees to Complete Screening
13.	<p>The system navigates to the <i>Apply for Healthy Indiana Plan (HIP)</i> page.</p> <p>✓ Click <i>Mail Application</i>.</p> 
14.	<p>The name, date of birth, and sex are pre-filled based on information entered during screening.</p> <p>✓ Update the information, if necessary, and enter the address.</p> <p>✓ When complete, click <i>Mail Application</i>.</p> 

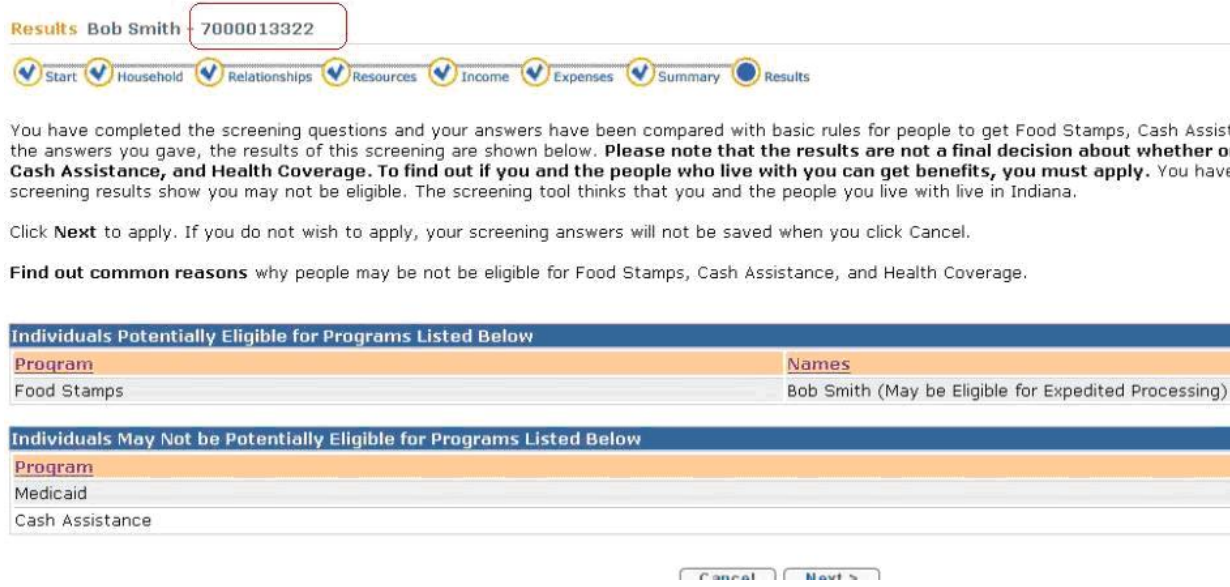
Step	Person Calls to Apply for HIP – Agrees to Complete Screening
15.	<p>After clicking <i>Mail Application</i>, click <i>Finish</i>.</p> <p>✓ Provide the caller with the confirmation number that appears on the screen, and ask the caller to write it down in case she has questions or wishes to track the application she has asked to be mailed.</p> <p>Confirmation to Mail Application</p> <hr/> <p>This Application will be mailed to the name and address you entered. When you receive it, please review and update the information necessary, sign it, and return it by mail or fax to the Indiana Famil</p> <div style="border: 1px solid #ccc; padding: 5px; margin: 10px 0;"> <p>Confirmation Number: 9000032523</p> </div> <p>FSSA Document Center PO Box 1630 Marion, Indiana 46952</p> <p>Phone & Fax 1-800-403-0864</p> <p>Please call Indiana Family and Social Services toll free at 1-800-403-0864 between 7 am - 7 pm EST Please click on Finish Button to print the application</p> <p> <input type="button" value="Back To Results"/> <input type="button" value="Finish"/> </p>
16.	<p>Wrap-up the call, making sure to thank the person for calling the Indiana Family and Social Services Administration.</p> <hr style="border: 1px solid blue;"/> <p>Note: <i>When the caller disconnects, the next call is automatically routed to you and the information on the screen is replaced by information related to the next call.</i></p> <hr/>





8.2.2.2 Person Calls to Apply for HIP and Other Benefits – Agrees to Complete Screening

Step	Person Calls to Apply for HIP and Other Benefits – Agrees to Complete Screening.
1.	Follow Steps 1-14 in Section 8.2.2.1, A Person Calls to Apply for HIP – Agrees to Complete Screening <insert hyperlink> .
2.	<p>Click <i>Back to Results</i> at the bottom of the screen.</p> <p>Confirmation to Mail Application</p> <hr/> <p>This Application will be mailed to the name and address you entered. When you receive it, please review and update the information necessary, sign it, and return it by mail or fax to the Indiana Famil</p> <p>Confirmation Number: 9000032523</p> <p>FSSA Document Center PO Box 1630 Marion, Indiana 46952</p> <p>Phone & Fax 1-800-403-0864</p> <p>Please call Indiana Family and Social Services toll free at 1-800-403-0864 between 7 am - 7 pm EST</p> <p>Please click on Finish Button to print the application</p> <p>Back To Results Finish</p>

Step	Person Calls to Apply for HIP and Other Benefits – Agrees to Complete Screening.
3.	<p>If the caller wants to apply for assistance (Food Stamps, Cash Assistance, Health Coverage):</p> <ul style="list-style-type: none"> ✓ Determine whether the caller is located in a county that has implemented the modernized solution. ✓ Ask the caller what county she resides in. Refer to Help Center Locations in the OPS Tool. ✓ If the caller is in a county that has not yet implemented modernization, provide the caller with the address and telephone number of the Help Center in their county and explain that the caller will need to apply there for these programs. Conclude the call. ✓ If the caller is in a county that has implemented modernization, continue with the next steps. ✓ Click <i>Apply for Benefits</i>. <p>Results James Smith - 9000032523</p>  <p>✓ The System navigates to the Apply for Programs screen.</p>

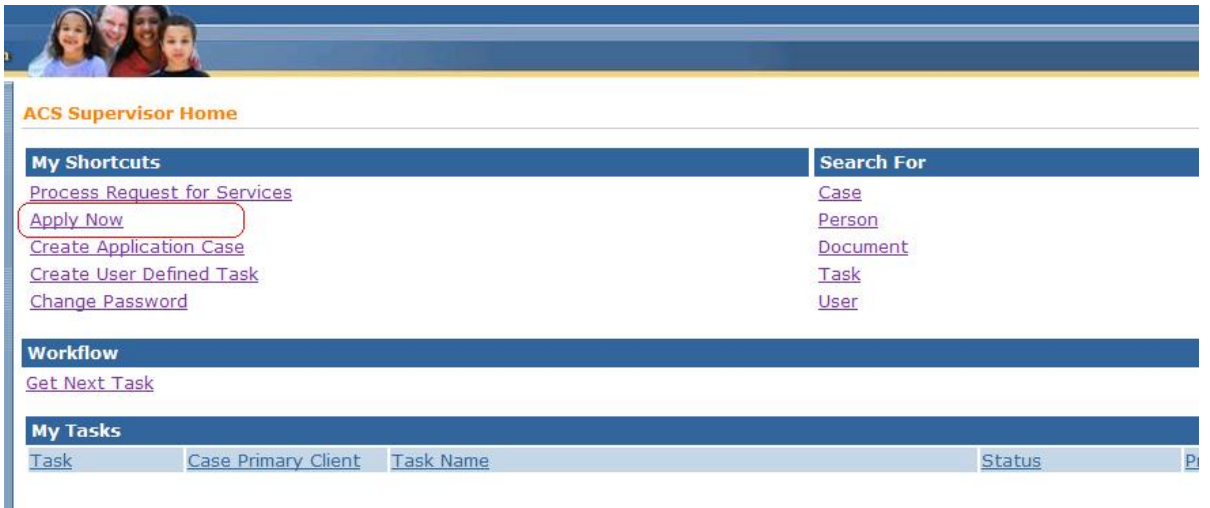
Step	Person Calls to Apply for HIP and Other Benefits – Agrees to Complete Screening.								
4.	<p>If the caller screened as potentially eligible for a program, it is automatically checked.</p> <p>Ask the caller what programs she is interested in applying for. If her response is different from what is automatically checked, select the programs she wants to apply for.</p> <ul style="list-style-type: none"> ✓ If she decides to have an application mailed to her, click <i>Mail Application</i>. ✓ Go to Step 6. <p>Apply for Programs</p> <hr/> <p>The programs already checked are those which one or more people may be able to get, based on the screening results. To remove a program, click on the box to remove the check mark. If you want to apply for a program that is not checked, click the box next to the program name.</p> <p>Please call Indiana Family and Social Services toll free at 1-800-403-0864 between 7 am - 7 pm EST if you have an application.</p> <p>To apply, click Print Application, Mail Application, or Apply Online.</p> <p>If you do not wish to apply, your screening answers will not be saved when you click Cancel.</p> <div> <p>Please select the programs you would like to apply from:</p> <table border="1"> <thead> <tr> <th data-bbox="337 856 451 882">Programs</th> <th></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/></td> <td>Food Stamps</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Cash Assistance(TANF)</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Health Coverage(Medicaid)</td> </tr> </tbody> </table> <p> <input type="button" value="Cancel"/> <input type="button" value="Mail Application"/> <input type="button" value="Print Application"/> <input type="button" value="Apply Online"/> </p> </div>	Programs		<input checked="" type="checkbox"/>	Food Stamps	<input type="checkbox"/>	Cash Assistance(TANF)	<input checked="" type="checkbox"/>	Health Coverage(Medicaid)
Programs									
<input checked="" type="checkbox"/>	Food Stamps								
<input type="checkbox"/>	Cash Assistance(TANF)								
<input checked="" type="checkbox"/>	Health Coverage(Medicaid)								



Step	Person Calls to Apply for HIP and Other Benefits – Agrees to Complete Screening.
5.	<p>If screening results indicate the caller is potentially eligible for Expedited Food Stamp processing and the caller decides to apply for Food Stamps:</p>  <p>✓ Explain to the caller that based on the outcome of the screening, the caller may be eligible for expedited services. Explain that we can schedule the caller for the next available appointment in a local office/Help Center, which is usually within two business days. If the caller has a hardship and asks to complete an application over the phone, explain that an application can be completed on-line or can be mailed. Explain that when the signed application is received, an appointment will be scheduled for the telephone interview.</p> <p>✓ If the caller selects the option to go to a local office, transfer the call to a Tier 1 (non-HIP) agent to schedule the appointment. Use Call Transfer Procedures <insert hyperlink to 4.14 Call Transfer Procedures> and transfer caller to the Tier 1 (non-HIP) agent using code 9901. Provide the caller with the Confirmation Number displayed at the top of the Results page. Explain to the caller that she will need to provide the Confirmation Number and identify herself again when speaking with the second agent to schedule the appointment for expedited services.</p> <p>Tier 1 (Non-HIP Agent) - Instructions</p> <ul style="list-style-type: none"> ✓ The agent who schedules the appointment uses the Confirmation number when scheduling the appointment in ICES at the closest Help Center or local office to the caller; Refer to Section 4.10, Scheduling Instructions and Rules Table <insert hyperlink> ✓ The agent who schedules the appointment provides the caller with the date, time and location of the interview and informs the caller to bring proof of identity, such as a driver's license, photo ID, or birth certificate. ✓ After scheduling the appointment, go to Step 9.

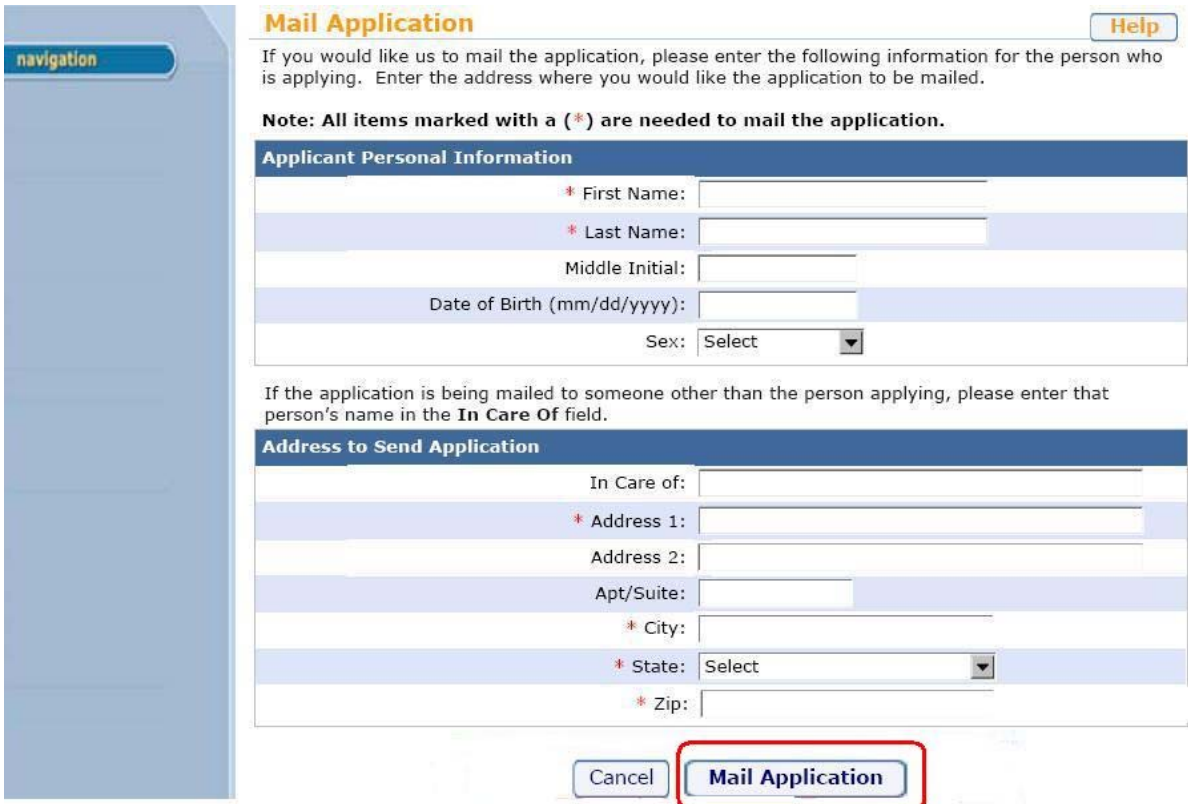
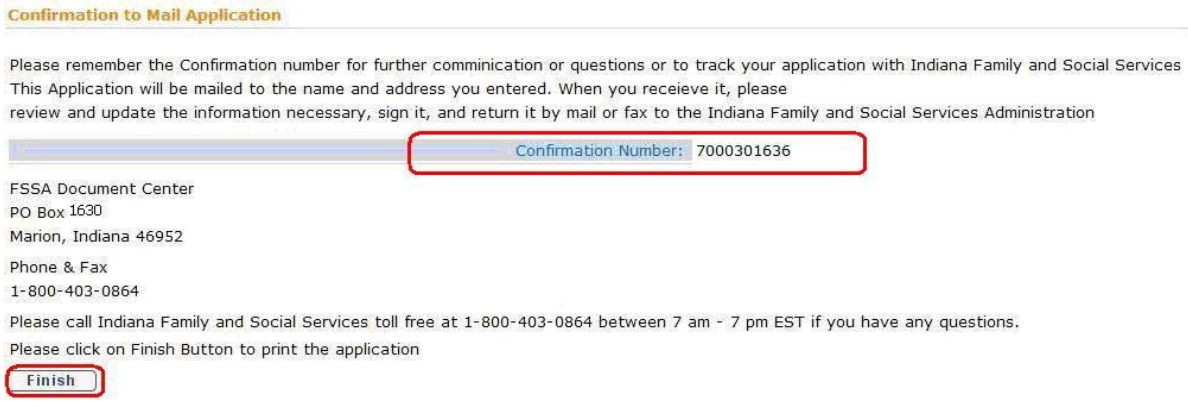
Step	Person Calls to Apply for HIP and Other Benefits – Agrees to Complete Screening.
6.	<p>The system navigates to the screen for entry of the caller's mailing address.</p> <ul style="list-style-type: none"> ✓ The first and last name and address fields are pre-filled with information entered during screening. Review the information with the caller and update, if necessary. Fields with an asterisk (*) are required entries; other fields are optional. ✓ Click <i>Mail Application</i>. <p>Information needed to send to Family Assistance Office Help</p> <p>If you would like us to mail the application, please enter the following information for the person who is applying. Enter the address where you would like the application to be mailed.</p> <p>Note: All items marked with a (*) need to be answered to complete screening.</p> <p>Address to Send Application</p> <p>*First Name: James Middle Initial: *Last Name: Smith Date of Birth(MM/DD/YYYY): 1/20/1980  Sex: Male </p> <p>Address</p> <p>*Address1: 123 TEST CASE Address2: Apartment: *City: MARION *State: Indiana  *Zipcode: 45678</p> <p>Cancel Mail Application</p>
7.	<p>Provide the caller with the confirmation number that appears on the screen and ask the caller to write it down in case she has questions or wishes to track the application she has asked be mailed.</p> <ul style="list-style-type: none"> ✓ Review the confirmation number with the caller for accuracy. ✓ Click <i>Finish</i> at the bottom of the screen. <p>Confirmation to Mail Application</p> <p>Please remember the Confirmation number for further communication or questions or to track your application with Indiana Family and Social Services This Application will be mailed to the name and address you entered. When you receive it, please review and update the information necessary, sign it, and return it by mail or fax to the Indiana Family and Social Services Administration</p> <p> Confirmation Number: 9000032523</p> <p>FSSA Document Center PO Box 1810 Marion, Indiana 46952 Phone & Fax 1-800-403-0864</p> <p>Please call Indiana Family and Social Services toll free at 1-800-403-0864 between 7 am - 7 pm EST if you have any questions. Please click on Finish Button to print the application</p> <p>Finish</p>

Step	Person Calls to Apply for HIP and Other Benefits – Agrees to Complete Screening.
8.	<p>Explain the application will be printed and mailed the next business day.</p> <ul style="list-style-type: none"> ✓ Advise the caller that she will be receiving 2 separate applications, one for HIP and the other for Food Stamps, cash assistance and health coverage (Medicaid). If she wants to apply for all programs, she must complete, sign and return both applications. ✓ Each application will come with instructions, as well as the fax number and addresses where to send the applications and any supporting verifications. ✓ Explain that each application packet will include instructions that should be read and followed, and that if the caller has questions, she should call back during business hours, 7 am-7 pm, Monday thru Friday except holidays. ✓ Remind the caller that the application processing begins when an application is returned to us and contains at least the applicant's name, address, signature and the program(s) she is applying for. ✓ Inform the caller that once the application is returned to us, we will send a letter notifying her of any required interview, the date and time of the interview, the type of interview (telephone or in-office); what additional information or verifications may be required to complete application processing, and when any requested information is due.
9.	<p>Wrap-up the call, making sure to thank the person for calling the Indiana Family and Social Services Administration.</p> <hr/> <p>Note: <i>When the caller disconnects, the next call is automatically routed to you and the information on the screen is replaced by information related to the next call.</i></p> <hr/>

8.2.2.3 A Person Calls to Apply for HIP - Decides Not to Screen

Step	Person Calls to Apply for HIP - Decides Not to Screen
1.	<p>After confirming the reason for the call (Steps 1-3 in Section 8.2.2.1, A Person Calls to Apply for HIP – Agrees to Complete Screening <insert hyperlink>), the caller decides not to complete the screening process during the call, but requests to have a HIP application mailed.</p> <ul style="list-style-type: none">✓ Explain you need to obtain her name and address so that the requested application can be mailed.✓ Click <i>Apply Now</i> from the User home page. 

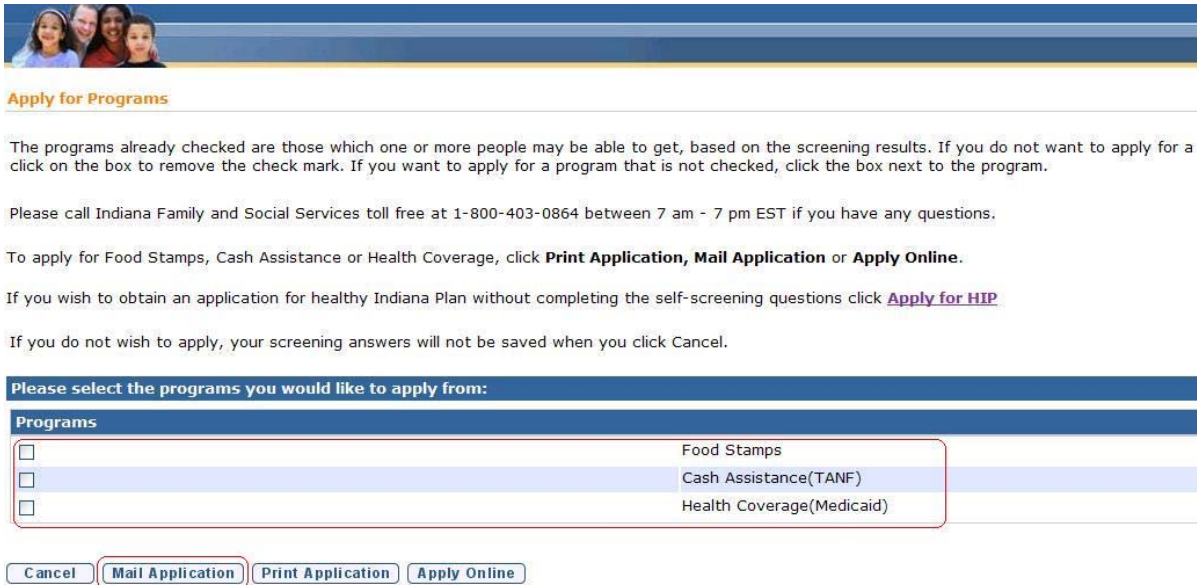
Step	Person Calls to Apply for HIP - Decides Not to Screen								
2.	<p>Click <i>Apply for HIP</i> from the Apply for Programs page.</p>  <p>Apply for Programs</p> <p>The programs already checked are those which one or more people may be able to get, based on the screening results. If you do not want to apply for a click on the box to remove the check mark. If you want to apply for a program that is not checked, click the box next to the program.</p> <p>Please call Indiana Family and Social Services toll free at 1-800-403-0864 between 7 am - 7 pm EST if you have any questions.</p> <p>To apply for Food Stamps, Cash Assistance or Health Coverage, click Print Application, Mail Application or Apply Online.</p> <p>If you wish to obtain an application for healthy Indiana Plan without completing the self-screening questions click Apply for HIP</p> <p>If you do not wish to apply, your screening answers will not be saved when you click Cancel.</p> <p>Please select the programs you would like to apply from:</p> <table border="1"> <thead> <tr> <th data-bbox="331 699 418 720">Programs</th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td><td>Food Stamps</td></tr> <tr> <td><input type="checkbox"/></td><td>Cash Assistance(TANF)</td></tr> <tr> <td><input type="checkbox"/></td><td>Health Coverage(Medicaid)</td></tr> </tbody> </table> <p>Cancel Mail Application Print Application Apply Online</p>	Programs		<input type="checkbox"/>	Food Stamps	<input type="checkbox"/>	Cash Assistance(TANF)	<input type="checkbox"/>	Health Coverage(Medicaid)
Programs									
<input type="checkbox"/>	Food Stamps								
<input type="checkbox"/>	Cash Assistance(TANF)								
<input type="checkbox"/>	Health Coverage(Medicaid)								
3.	<p>Click <i>Mail Application</i> from the Apply for Healthy Indiana Plan (HIP) page.</p>  <p>Apply for Healthy Indiana Plan (HIP)</p> <p>Screening for Services To determine if you are potentially eligible for HIP, complete Screen for Services</p> <p>Print a HIP Application You can print a blank application now. Click Print Application</p> <p>Mail a HIP Application You can choose to have a blank application mailed to you. Click Mail Application and enter the name and address information requested</p> <p>Additional Information For additional information about Healthy Indiana Plan Click Here</p> <p>Cancel Print Application Mail Application</p>								

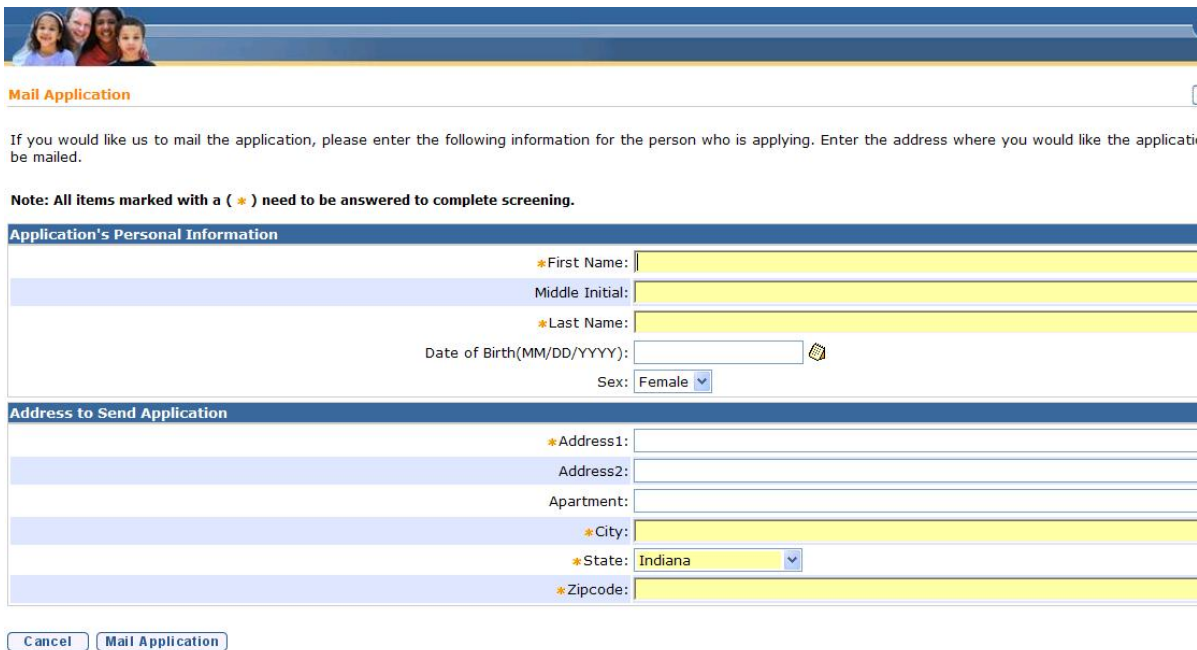
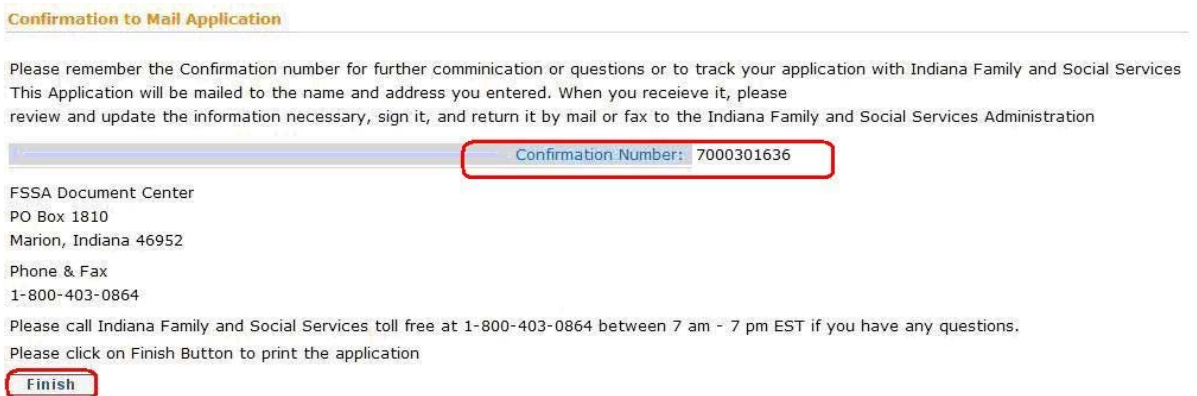
Step	Person Calls to Apply for HIP - Decides Not to Screen
4.	<p>Complete the Name and Address, and if the Client is willing to provide, the Date of Birth and Sex. When complete, click <i>Mail Application</i>.</p> 
5.	<p>Provide the caller with the confirmation number that appears on the screen and ask the caller to write it down in case she has questions or wishes to track the application she has asked be mailed.</p> <ul style="list-style-type: none"> ✓ Review the confirmation number with the caller for accuracy. ✓ Click <i>Finish</i> at the bottom of the screen. 

Step	Person Calls to Apply for HIP - Decides Not to Screen
6.	<p>Wrap-up the call, making sure to thank the person for calling the Indiana Family and Social Services Administration.</p> <hr/> <p><i>Note: When the caller disconnects, the next call is automatically routed to you and the information on the screen is replaced by information related to the next call.</i></p> <hr/>

8.2.2.4 A Person Calls to Apply for HIP and Other Programs - Decides Not to Screen

Step	A Person Calls to Apply for HIP and Other Programs - Decides Not to Screen
1.	<p>Follow Steps 1-5 in Section 8.2.2.3, Person Calls to Apply for HIP – Decides Not to Screen <insert hyperlink>.</p> <p>After mailing the HIP application, take the following steps when a caller also wants to apply for Food Stamps, Cash Assistance, or Health Coverage but does not want to complete screening.</p> <ul style="list-style-type: none"> ✓ Determine whether the caller is located in a county that has implemented the modernized solution. ✓ Ask the caller what county she resides in. Refer to Help Center Locations in the OPS Tool. ✓ If the caller is in a county that has not yet implemented modernization, provide the caller with the address and telephone number of the Help Center in her county and explain that the caller will need to apply there for Food Stamps, Cash Assistance or Health Coverage (Medicaid). Conclude the call. ✓ If the caller is in a county that has implemented modernization, continue with the next steps. ✓ Explain that if the caller has internet access, she can apply for these programs on-line or you can mail her an application. If she is interested in applying on-line, explain she can apply at www.in.gov/fssa, clicking Apply for Benefits and selecting her county. ✓ If the caller does not have internet access or does not wish to apply on-line, click <i>Apply Now</i> from the User home page to mail her an application.

Step	A Person Calls to Apply for HIP and Other Programs - Decides Not to Screen								
2.	<p>Since the caller did not screen for potential eligibility, none of the programs are pre-checked.</p> <ul style="list-style-type: none"> ✓ Ask the caller which programs she wants to apply for and check the appropriate box(es). ✓ Click <i>Mail Application</i>.  <p>Apply for Programs</p> <p>The programs already checked are those which one or more people may be able to get, based on the screening results. If you do not want to apply for a click on the box to remove the check mark. If you want to apply for a program that is not checked, click the box next to the program.</p> <p>Please call Indiana Family and Social Services toll free at 1-800-403-0864 between 7 am - 7 pm EST if you have any questions.</p> <p>To apply for Food Stamps, Cash Assistance or Health Coverage, click Print Application, Mail Application or Apply Online.</p> <p>If you wish to obtain an application for healthy Indiana Plan without completing the self-screening questions click Apply for HIP</p> <p>If you do not wish to apply, your screening answers will not be saved when you click Cancel.</p> <p>Please select the programs you would like to apply from:</p> <table border="1"> <thead> <tr> <th data-bbox="331 894 415 911">Programs</th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td>Food Stamps</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Cash Assistance(TANF)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Health Coverage(Medicaid)</td> </tr> </tbody> </table> <p> <input type="button" value="Cancel"/> <input type="button" value="Mail Application"/> <input type="button" value="Print Application"/> <input type="button" value="Apply Online"/> </p>	Programs		<input type="checkbox"/>	Food Stamps	<input type="checkbox"/>	Cash Assistance(TANF)	<input type="checkbox"/>	Health Coverage(Medicaid)
Programs									
<input type="checkbox"/>	Food Stamps								
<input type="checkbox"/>	Cash Assistance(TANF)								
<input type="checkbox"/>	Health Coverage(Medicaid)								

Step	A Person Calls to Apply for HIP and Other Programs - Decides Not to Screen
3.	<p>The system navigates to the screen for entry of the caller's mailing address.</p> <ul style="list-style-type: none"> ✓ Enter the caller's name and address. ✓ Click <i>Mail Application</i>. 
4.	<p>Provide the caller with the confirmation number that appears on the screen and ask the caller to write it down in case she has questions or wishes to track the application she has asked be mailed.</p> <ul style="list-style-type: none"> ✓ Review the confirmation number with the caller for accuracy. ✓ Click <i>Finish</i> at the bottom of the screen. 

Step	A Person Calls to Apply for HIP and Other Programs - Decides Not to Screen
5.	<p>Explain the application will be printed and mailed the next business day.</p> <ul style="list-style-type: none"> ✓ Advise the caller that she will be receiving 2 separate applications, one for HIP and the other for Food Stamps, cash assistance and health coverage (Medicaid). If she wants to apply for HIP and another programs, she must complete, sign and return both applications. ✓ Each application will come with instructions, as well as the fax number and addresses where to send the applications and any supporting verifications. ✓ Explain that each application packet will include instructions that should be read and followed, and that if the caller has questions, she should call back during business hours, 7 am-7 pm, Monday thru Friday, except holidays. ✓ Remind the caller that the application processing begins when an application is returned to us and contains at least the applicant's name, address, signature and the program(s) she is applying for. ✓ Inform the caller that once the application is returned to us, we will send a letter notifying her of any required interview, the date and time of the interview, the type of interview (telephone or in-office); what additional information or verifications may be required to complete application processing, and when any requested information is due.
6.	<p>Wrap-up the call, making sure to thank the person for calling the Indiana Family and Social Services Administration.</p> <hr/> <p>Note: <i>When the caller disconnects, the next call is automatically routed to you and the information on the screen is replaced by information related to the next call.</i></p> <hr/>